



CONTRACT AWARD SHEET
Internal Services Department
Procurement Management Services

*Bid No. **RTQ-00256***
Award Sheet

PROCUREMENT DIVISION

BID NO.: **RTQ-00256**

PREVIOUS BID NO.: **9081-4/14-4**

TITLE: **REPAIRS REPLACEMENT/PARTS APPL.& KITC**

CURRENT CONTRACT PERIOD: **06/01/2016** through **05/31/2024**

Total # of OTRs: **0**

MODIFICATION HISTORY

*Bid No. **RTQ-00256***

Award Sheet

DPM Notes

APPLICABLE ORDINANCES

LIVING WAGE: **No**

UAP: **No**

IG: **No**

OTHER APPLICABLE ORDINANCES:

CONTRACT AWARD INFORMATION:

No Local Preference

No Micro Enterprise

Full Federal Funding

No Performance Bond

Small Business Enterprise (SBE)

PTP Funds

Partial Federal Funding

No Insurance

Miscellaneous:

REQUISITION NO.:

PROCUREMENT AGENT: **HAMMETT MARY**

PHONE: 305 375-5471

FAX: 305 375-4407

EMAIL: MHAMMET@MIAMIDADE.GOV

DEPARTMENT OF PROCUREMENT MANAGEMENT
PROCUREMENT DIVISION

Page 1 of 6

VENDOR NAME: **ALADDIN TEMP RITE LLC**
 DBA:
 FEIN: **061523665** SUFFIX : **01** 37075
 STREET: **250 EAST MAIN ST** CITY: **HENDERSONVILLE** ST: **TN** ZIP:
 FOB_TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **800-888-8018**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
ELAINE BARCH	615-537-3600	800-888-8018	888-812-9956	PRICINGBIDS@ALADDIN-ATR.COM

VENDOR NAME: **HERITAGE FOOD SERVICE GROUP INC**
 DBA:
 FEIN: **453742972** SUFFIX : **01** 46808
 STREET: **5130 Executive Blvd** CITY: **Fort Wayne** ST: **IN** ZIP:
 FOB_TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
Tari Kovets	800-4585593	-	-	contractservices@hfse.com

VENDOR NAME: **FAT FREE INC**
 DBA: **Fat Free Systems**
 FEIN: **260386617** SUFFIX : **01** 33311
 STREET: **2722 NW 30th Ave** CITY: **Lauderdale Lakes** ST: **FL** ZIP:
 FOB TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **888-4851495**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
Gail Mathieson	954-6960361	888-4851495	954-9906596	gail.mathieson@fatfreeinc.com

VENDOR NAME: **WHALEY FOODSERVICE REPAIRS INC**
 DBA: **Whaley Parts and Supply**
 FEIN: **570374644** SUFFIX : **01** 29073
 STREET: **137 Cedar Road** CITY: **Lexington** ST: **SC** ZIP:
 FOB TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **800-8772662**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
STEPHANIE M CHAVIS	800-8772662	800-8772662	803-9969910	STEPHANIE.CHAVIS@WHALEYPARTS.

VENDOR NAME: **ADVANCE CASE PARTS INC.**
 DBA:
 FEIN: **223972729** SUFFIX : **01** 33065
 STREET: **12489 NW 44TH STREET** CITY: **CORAL SPRINGS** ST: **FL** ZIP:
 FOB TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

VENDOR INFORMATION:*CERTIFIED VENDOR**ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
Ashley Valdeperas	954-7739090	-	954-9703359	service@advancecaseparts.com

VENDOR NAME: **TWC SERVICES INC**
 DBA:
 FEIN: **030529652** SUFFIX : **01** 33016
 STREET: **14042 NW 82nd Avenue** CITY: **Miami Lakes** ST: **FL** ZIP:
 FOB TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

VENDOR INFORMATION:*CERTIFIED VENDOR**ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
Omar Fleches	305-8870783	-	305-8871472	omar.fleches@twcservices.com

ITEMS AWARDED Section:

Details: **RTQ-00256**

SEE ATTACHED ROAD MAP

Item # Description

Qty

Unit Price

End of ITEMS AWARDED Section

AWARD INFORMATION Section

BCC Award: **No**

DPM Award: **No**

BCC Date: **05/17/2016**

DPM Date: **02/02/2016**

Contract Amount: \$ **2,425,000.00**

Additional Items Allowed:

Agenda Item No.:

Special Conditions:

SECTION 2

BPO INFORMATION Section:

1	ABCW1600448	
	Commodity ID	Commodity Name
	931-30	CAFETERIA AND KITCHEN EQUIPMENT,
	Department	Department Allocation
	CO	\$45,000.00
	HD	\$100,000.00
2	ABCW1600449	
	Commodity ID	Commodity Name
	931-30	CAFETERIA AND KITCHEN EQUIPMENT,
	Department	Department Allocation
	AV	\$20,000.00
	CO	\$80,000.00
	CR	\$2,000,000.00
	PE	\$15,000.00
	PR	\$140,000.00
	VZ	\$25,000.00

End of BPO Information Section